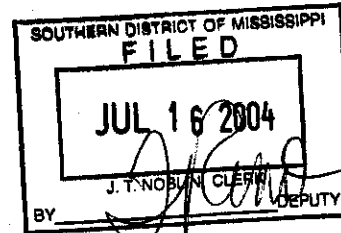


IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF MISSISSIPPI

COMPLAINT

LESTER Jones
(Enter above the full name of the plaintiff or plaintiffs and prisoner
number of each plaintiff in this action)



V.

CIVIL ACTION NUMBER

5:04cv183 Br Su
(to be completed by the Court)

Chief C. Walker
Chief warden J. Ellis
warden Dolan Waller
~~James Fountain~~
(Enter above the full name of the defendant or defendants in this action)

OTHER LAWSUITS FILED BY PLAINTIFF

NOTICE AND WARNING:
The plaintiff must fully complete the following questions. Failure to do so may result in your case being dismissed.

- A. Have you ever filed any other lawsuits in a court of the United States? Yes () No (☒)
- B. If your answer to A is yes, complete the following information for each and every civil action and appeal filed by you. (If there is more than one action, complete the following information for the additional actions on the reverse side of this page or additional sheets of paper.)

1. Parties to the action N/A

2. Court (if federal court, name the district; if state court, name the county): N/A

3. Docket Number N/A

4. Name of judge to whom case was assigned. N/A

5. Disposition (for example: was the case dismissed? If so, what grounds? Was it appealed? Is it still pending?): N/A

PARTIES

Item I below, place your name and prisoner number in the first blank and place your present address in the second blank. Do the same for additional plaintiff, if any).

I Name of plaintiff: Lester Jones Prisoner Number: 49366
Address: 2999 Hwy 61 N. Woodville MS. 39669

(In item II below, place the full name of the defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use the space below item II for the names, positions, and places of employment of any additional defendants.)

II Defendant: C. Walker is employed as W.C.C.F. Chief at W.C.C.F. Woodville MS.

The plaintiff is responsible for providing the court the name and address of each plaintiff(s) as well as the name(s) and address(es) of each defendant(s). Therefore, the plaintiff is required to complete the portion below:

NAME: LESTER JONES ADDRESS: 2999 Hwy N. Woodville, MS 39669

DEFENDANT(S):

NAME: C. Walker ADDRESS: 2999 Hwy 61 N. Woodville MS. 39669
J. Ellis 2999 Hwy 61 N. Woodville MS. 39669
D. Waller 2999 Hwy 61 N. Woodville MS. 39669
J. Fountain 2999 Hwy 61 N. Woodville MS. 39669
F. Pate 2999 Hwy 61 N. Woodville MS. 39669
Wm. Collins 2999 Hwy 61 N. Woodville MS. 39669
Wm. Werner 2999 Hwy 61 N. Woodville MS. 39669
File Chief Butro U/K was Relested from the W.C.C.F
Christopher Epps 723 N. President St. Jackson MS. 39202
Glenn Spann M.D.O.C Administrative Remedy Program
L. Percy Believe to BE at Parchman MS. 38738
2999 Hwy 61 N. Woodville, MS. 39669

ADMINISTRATIVE REMEDIES PROGRAM

- A. At the time of the incident complained of in this complaint, were you incarcerated because you had been convicted of a crime?
Yes (☒) No (☐)
- B. Are you presently incarcerated for a parole or probation violation?
Yes (☐) No (☒)
- C. Did you present the facts relating to your complaint in the administrative or grievance procedure in your institution?
Yes (☒) No (☐)
1. If you answer to C is yes,
- a. State the date your claims were presented 3-23-04
- b. State how your claims were presented. (Written request, verbal request, request for forms)
Written Request (SEE attached)
- c. State the result of that procedure (You must attach a copy of the final result, such as a certificate from the administrator of the Administrative Remedies Program stating that you have exhausted your administrative remedies.)
SEE Exhausted of A-R-P
2. If you have not filed a grievance, state the reasons.
Done so.

AUG 13 2004

J. T. NOBLIN, CLERK

DEPUTY

STATEMENT OF C I I

5:040V183

State here as briefly as possible the facts of your case. Describe how each defendant is involved. Also, include the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of different claims, number and set forth each claim in a separate paragraph. (Use as much space as you need; attach extra sheet if necessary.)

on the 10/23/03 it was a morning at W.C.S.F and one of the legal Dept. Inmate that was helping me on my case had my legal work so I asked file chief Butro could he help me get my legal work from the inmate before he leave the facility. so Butro did get my legal work but by the time he got to the doorway to give it to me Collins Chief Walker stopped him and order him to put it down. Mr Butro stated that it is Lester Jones legal work so Chief Walker stated that "well that's his problem" from the date of 10/23/03 to 7-10-04 I still have not got my legal work

RELIEF

State what relief you seek from the court. Make no legal arguments. Cite no cases or statutes.

- 1) I would like to have all my legal work back, that are all on my case that I am locked up for.
- 2) and that all the Defendants on this Complaint put help in getting all my legal work back to me

Signed this 2 day of Aug.

2004

Lester Jones
Signature of plaintiff(s)

I declare under penalty of perjury that the foregoing is true and correct

8-204
(Date)

Lester Jones
Signature of plaintiff(s)

STATEMENT OF CLAIM

State here as briefly as possible the facts of your case. Describe how each defendant is involved. Also, include the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of different claims, number and set forth each claim in a separate paragraph. (Use as much space as you need; attach extra sheet if necessary.)

on the 10/25/03 it was a moving at W.C.F. and one of the legal Dept. inmate that was helping me on my case had my legal work so I asked file chief Butro could he help me get my legal work from the inmate before he leave the facility. so Butro did get my legal work but by the time he got to the doorway to give it to me Collins Chief Walker stopped him and order him to put it down. Mr Butro stated that it is Lester Jones legal work so Chief Walker stated that "well that his problem" from the date of 10/23/03 to 7-10-04 I still have not got my legal work

RELIEF

State what relief you seek from the court. Make no legal arguments. Cite no cases or statutes.

- 1) I would like to have all my legal work back, that are all on my case that I am locked up for.
- 2) and that all the Defendants on this Complaint put help in getting all my legal work back to me

Signed this _____ day of _____

20

Signature of plaintiff(s)

I declare under penalty of perjury that the foregoing is true and correct

(Date)

Signature of plaintiff(s)

Authorization for Release of Institutional Account Information and
Payment of the Filing Fee

I, Lester Jones
(Name of Plaintiff)

49366
(MDOC Number)

authorize the Clerk of Court to obtain, from the agency having custody of my person, information about my institutional account, including balances, deposits and withdrawals. The Clerk of Court may obtain my account information from the past six months and in the future, until the filing fee is paid. I also authorize the agency having custody of my person to withdraw funds from my account and forward payments to the Clerk of Court, in accord with 28 U.S.C. Section 1915.

Lester Jones
(Signature of Plaintiff)

(Date)

IT IS PLAINTIFF'S RESPONSIBILITY TO HAVE THE APPROPRIATE PRISON
OFFICIAL COMPLETE AND CERTIFY THE CERTIFICATE BELOW

CERTIFICATE TO BE COMPLETED BY AUTHORIZED OFFICER

I certify that the applicant named herein has the sum of \$ 3.36
on account to his credit at the WCCF institution where he is
confined. I further certify that the applicant likewise has the following securities to his credit
according to the records of said institution 0

I further certify that during the last six (6) months the
plaintiff's average monthly balance was \$ 1.45

I further certify that during the last six (6) months the
plaintiff's average monthly deposit was \$ 45.15

601-888-3199
TELEPHONE NUMBER OF
OFFICER FOR VERIFICATION

7-13-04

DATE

Ina Walker
AUTHORIZED OFFICER OF INSTITUTION
Ina Walker
PRINT NAME OF AUTHORIZED OFFICER

RETURN COMPLETED FORM TO:
U.S. DISTRICT COURT
245 F. CAPITOL ST., ROOM 316
JACKSON, MS 39201

MISSISSIPPI DEPARTMENT OF CORRECTIONS

0300
(P)NUMBER WCCF-04-227

OFFENDER'S RELIEF REQUEST FORM

Type or use ball-point pen.

TO J. Ellis WCCF
First Step Respondent Location

FROM Lester Jones #49366 WCCF
Offender's Name and Number Housing Unit

Date of Incident

☒ ACCEPTED. This request comes to you from the Legal Claims Adjudicator. See the attached request from the offender. Please return your response to this office within 10 days of this date.

☐ REJECTED. Your request has been rejected for the following reason(s):

3.23.04

Date

[Signature]
Legal Claims Adjudicator

SECOND STEP (Pink Copies)

On 4-20-04 (date), I received a written response to my First Step request. I am not satisfied with this response because on the 10/23/03 Chiff Walker told Mr. Butro to put my legal work down at the door that have Chiff Walker Responsible for my legal work. this was after Mr Butro told him that it was my legal work. Chiff walker stated him self that it may be in the trash.

Therefore, I am commencing the Second Step by sending the pink copy of this form (ARP-1), the pink copy of the First Step response (ARP-2), to the Superintendent. This request must reach the Superintendent's office within 5 days of my receiving the First Step response.

4-20-04

Date

Lester Jones
Signature

THIRD STEP (Light Yellow Copies)

On 5-13-04 (date), I received a written response to my Second Step request. I am not satisfied with this response because the information that was gathered was from Chiff Walker and he is going to say that he Didnot throw my legal work away

I am commencing the Third Step by sending the light yellow copy of this form and the light yellow copies of my First and Second responses, to the Commissioner. This request must be sent within 5 days of my receiving the Second Step response.

5-17-04

Date

Lester Jones
Signature

INSTRUCTIONS TO OFFENDER: This original is for you to keep.

OFFENDER'S ORIGINAL

Fick 1825

MISSISSIPPI DEPARTMENT OF CORRECTIONS

NUMBER WCCF - 04 - 227

FIRST STEP RESPONSE FORM

Type or use ball point pen. You must return your response to the Legal Claims Adjudicator within 10 days of the date the request was initiated.

TO: Lester Jones # 49366
Offender's Name and Number

WCCF
Housing Unit

FROM: J. Ellis
Person to whom 1st Step is Directed

Warden-WCCF
Title/Location

I have reviewed your complaint. Chief Walker has stated that he did not throw away legal paperwork of (1) Jones, Lester. Nothing present proves otherwise. Your A.R.P. is Denied.

4.12.04

Date

J. Ellis
Signature

If you are not satisfied with this response, you may go to STEP 2 by filling out the second step section of Form ARP-1 and sending the pink copies of ARP-1 and ARP-2 to the Superintendent. It must be received in the Superintendent's office within 5 days of the date of this response.

INSTRUCTIONS TO RESPONDENT: Send original along with STEP 3 and STEP 2 copies to the Legal Claims Adjudicator. Keep Respondent's copy. **NOTE:** A copy of all documents referenced in the response must be attached and returned to the Legal Claims Adjudicator.

INSTRUCTIONS TO OFFENDER: This original is for you to keep.

OFFENDER'S ORIGINAL

MISSISSIPPI DEPARTMENT OF CORRECTIONS

NUMBER WCCF- 04 - 227**SECOND STEP RESPONSE FORM**
(SUPERINTENDENT)

Type or use ball point pen. You must respond to the offender within 25 days of receipt of the offender's request.

TO: Lester Jones #49366 WCCF

Offender's Name and Number

Housing Unit

FROM: Dolan Walter WCCF

Superintendent

Institution

In response to your ARP claim in reference to your legal material. I have investigated your claim. Information I have gathered reveals that Chief Walker has stated that he did not throw away your legal work. I find no evidence to support your claim. I consider this matter resolved at this level.

5-13-04

Date

[Signature]

Superintendent's Signature

If you are not satisfied with this response, you may go to STEP 3 by filling out the third step section of ARP-1 and sending the light yellow copies of ARP-1, ARP-2, AND ARP-3 to the Commissioner, Mississippi Department of Corrections. These forms must reach his office within 5 days of the date of this response.

INSTRUCTIONS TO SUPERINTENDENT: Send original and STEP 3 copy to the inmate. Keep Superintendent's Copy.

INSTRUCTIONS TO OFFENDER: This original is for you to keep.

OFFENDER'S ORIGINAL

MISSISSIPPI DEPARTMENT OF CORRECTIONS

NUMBER WCCF 04 227**THIRD STEP RESPONSE FORM**
(COMMISSIONER)

You must respond to the OFFENDER within 40 days of receipt of the appeal of the STEP 2 Response.

Lester Jones #49366**WCCF**

TO: _____

Offender's Name and Number

Housing Unit

Your request for Administrative Remedy involves a complaint to the effect that Chief Walker is responsible for misplacing your legal material.

The staff of the Administrative Remedy Program has received and investigated your grievance and the following determination has been made:

You have failed to provide sufficient evidence to substantiate your allegation.

Therefore, based upon the facts outlined above, your request for further relief is hereby denied.

4/3/04
DateChristopher B. Epps JS
Signature

INSTRUCTIONS TO OFFENDER: This original is for you to keep.

IF YOU ARE NOT SATISFIED WITH THIS RESPONSE, YOU MAY WITHIN THIRTY (30) DAYS AFTER RECEIPT OF THIS DECISION, SEEK JUDICIAL REVIEW.

OFFENDERS ORIGINAL

CERTIFICATE

RE: ARP# WCCF 04 227 CLASS: Legal Material

Inmate states that WCCF security staff is responsible for misplacing his legal material; however inmate has failed to provide evidence to substantiate his allegations. Staff denies inmate's allegation.

This document is to certify that Inmate Lester Jones,
MSP# 49366, has fulfilled the requirements of the Administrative
Remedy Program and is eligible to seek judicial review within 30 days of receipt of the
Third Step Response.

A copy of the Third Step Response Form must be attached to this certificate in
order to file in either State or Federal Court.

This, the 3 day of June, 2004.

Glenn Spann
Glenn Spann, Administrator
Administrative Remedy Program